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Florida Department of State

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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COR AMND/RESTATE/CORRECT OR O/D RESIGN RIVER OF HOPE FOUNDATION, INC.

Certificate of Status	0
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Page Count	03
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Articles of Amendment to Articles of Incorporation

RIVER OF HOPE FOUNDATION, INC. (Name of Corporation as currently filed with the Florida Dept. of State) N07000011804 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>	<u>N/A</u>	TAR TO
Enter new mailing address, if applicable:	N/A	SATE OF THE SATE O
. (Mailing address MAY RE A PUST UPFILE BUA)		
(Mailing address MAY BE A POST OFFICE ROX)		
(Mailing address <u>MAY BE A PUST OCTICE BUS</u>)		
If amending the registered agent and/or registered off	ce address in Florids	enter the name of the
	ce address in Florids	enter the name of the
If amending the registered agent and/or registered off new registered agent and/or the new registered office	ce address in Florida	enter the name of the
If amending the registered agent and/or registered off new registered agent and/or the new registered office Name of New Registered Agent:	ce address in Florids address: N/A	enter the name of the
If amending the registered agent and/or registered off new registered agent and/or the new registered affice Name of New Registered Agent:	ce address in Florida address: N/A N/A	enter the name of the

Signature of New Registered Agent, if changing

position.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary)

<u>Title</u>	Name	Address	Type of Action
D	PAULA IVERSEN	747 MICHIGAN AVENUE #201 MIAMI BEACH, Ft. 33139	☐ Add ☑ Remove
	,		☐ Add ☐ Remove
E. If amending (attach addition)	e or adding edditional Articles, enter o tional sheets, if necessary). (Be specific	hange(s) herg:	
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The date of each amendmen	t(s) adoption: <u>03/09/2010</u>
Effective date <u>if applicable</u> :	03/09/2010 (date of adaption is required)
	(no more than 90 days after amendment file dute)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we was/were sufficient for app	re adopted by the members and the number of votes cast for the amendment(s) roval.
There are no members or a sdopted by the board of dis	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
Dated_03/0	9/2010
Signature	E-13:
(By hav	the chairman or vice chairman of the board, president or other officer-if directors a not been selected, by an incorporator — if in the hands of a receiver, trustee, or a court appointed fiduciary by that fiduciary)
	CAMILLE CHEE-AWAI
	(Typed or printed name of person signing)
	DIRECTOR
	(Title of person signing)

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